



BANNER & WITCOFF, LTD.
INTELLECTUAL PROPERTY LAW

10 SOUTH WACKER DRIVE, SUITE 3000
CHICAGO, ILLINOIS 60606

TEL: 312.715.1000
FAX: 312.715.1234
www.bannerwitcoff.com

FACSIMILE TRANSMITTAL SHEET

TO:
Commissioner for Patents

FROM:
Charles W. Shifley

RECEIVED
CENTRAL FAX CENTER
FEB 09 2005

COMPANY:
United States Patent and Trademark Office

DATE:
February 9, 2005

FAX NO.:
703-872-9306

TOTAL NO. OF PAGES: (including cover sheet)

5

YOUR REFERENCE NO.:
Application Serial No.: 10/795,812

OUR REFERENCE (C/M) NO.:
Atty Docket No.: 006087.00015

RE: Request for Withdrawal as Attorney or Agent and Change of Correspondence Address

If you do not receive all page(s) or have any problems receiving this transmission, please call:

NAME:
Shannon Salamone

PHONE:
312-463-5568

COMMENTS:

Important/Confidential: This message is intended only for the use of the individual or entity to whom it is addressed. This message contains information from the law firm of Banner & Witcoff, Ltd. which may be privileged, confidential or exempt from disclosure under applicable law. If the reader of this message is not the intended recipient, you are hereby notified that any dissemination, distribution, retention, archiving, or copying of the communication is strictly prohibited. If you have received this communication in error, please notify us immediately at our telephone number listed above. We will be happy to arrange for the return of this message to our offices at no cost to you.

CHICAGO

WASHINGTON, D.C.

BOSTON

PORTLAND, OR

PTO/SB/97 (08-00)

Approved for use through 01/31/2008. OMB 0851-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Certificate of Transmission under 37 CFR 1.8

I hereby certify that this correspondence is being transmitted
via facsimile to (703) 872-9306 at the United States Patent
and Trademark Office.

on February 9, 2005

Date

DM Rolon Signature

Typed or printed name of person signing Certificate

Note: Each paper must have its own certificate of transmission, or this
certificate must identify each submitted paper.

Facsimile cover sheet;
Certificate of Facsimile Transmission;
Transmittal (1 page) in duplicate
Request for Withdrawal as Attorney or Agent and Change of Correspondence
Address (1 page)

Burden Hour Statement: This form is estimated to take 0.03 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Mail Stop Missing Parts, Alexandria, VA 22313-1450.

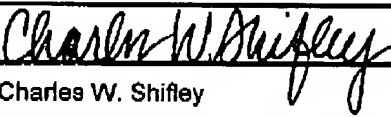
PTO/SB/21 (09-04)

Approved for use through 07/31/2008. OMB 0651-0031
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number	10/795,812
		Filing Date	3-08-2004
		First Named Inventor	Wayne J. Breda
		Art Unit	3662
		Examiner Name	TBD
Total Number of Pages in This Submission		Attorney Docket Number	006087.00015

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Request for Withdrawal as Attorney or Agent and Change of Correspondence Address Certificate of Facsimile Transmission
Remarks Being filed via Facsimile The Commissioner is hereby authorized to charge any deficiencies in payment or credit any overpayment to our Deposit Account 19-0733.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm	Banner & Witcoff, LTD.		
Signature			
Printed Name	Charles W. Shifley		
Date	February 9, 2005	Reg. No.	28,042

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Signature			
Typed or printed name		Date	

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual cases. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

PTO/SB/83 (09-03)

Approved for use through 11/30/2005. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT and CHANGE OF CORRESPONDENCE ADDRESS

Application Number	10/795,812
Filing Date	3-08-2004
First Named Inventor	Wayne J. Breda
Art Unit	3662
Examiner Name	TBD
Attorney Docket Number	006087.00015

To: Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Please withdraw me as attorney or agent for the above identified application, and

- ☐ all the attorneys/agents of record.
- ☐ the attorneys/agents (with registrations numbers) listed on the attached paper(s), or
- ☒ the attorneys/agents associated with Customer Number **22908**

NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

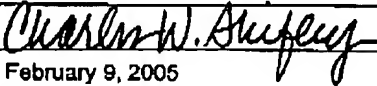
The reasons for this request are:

Pursuant to 37 C.F.R. § 10.40(c)(i)(vi) - client failure to pay one or more bills rendered by the practitioner for an unreasonable period of time

1. ☐ The correspondence address is NOT affected by this withdrawal.
2. ☒ Change the correspondence address and direct all future correspondence to:

☐ Customer Number

OR

<input checked="" type="checkbox"/> Firm or Individual Name	Wayne J. Breda MD				
Address	5 Tuttle Avenue				
Address					
City	Clarendon Hills	State	IL	ZIP	60514-1153
Country	USA				
Telephone	(630) 531-3331	Fax	(630) 834-3332		
Name	Charles W. Shifley				
Signature			Registration No.	28,042	
Date	February 9, 2005		Telephone No.	312-463-5000	

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public: which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.